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\*\* CONTINUING DATA \*\*\*\*\* *NONE SR*\*\* FOREIGN APPLICATIONS \*\*\*\*\* *NONE 4*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY VT	SHEETS DRAWING 14	TOTAL CLAIMS 29	INDEPENDENT CLAIMS 4
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>gr</i>				
Verified and Acknowledged	Examiner's Signature <i>Cr</i>	Initials <i>gr</i>		

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FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> All Fees
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